Fill in this information to identify your		
United States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA		
Case number (if known):	Chapter you are filing under: ✓ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13	☐ Check if this is a amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Identify Yourself** About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Your full name Write the name that is on your Scott government-issued picture First Name First Name identification (for example, your driver's license or Middle Name Middle Name passport). Smith Last Name Bring your picture Last Name identification to your meeting with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) All other names you have used in the last 8 First Name First Name years Middle Name Middle Name Include your married or maiden names. Last Name Last Name Only the last 4 digits of xxx - xx - 2 7 2 4xxx - xx your Social Security number or federal OR OR Individual Taxpayer Identification number 9xx - xx -9xx - xx -(ITIN) Any business names I have not used any business names or EINs. ☐ I have not used any business names or EINs. and Employer **Identification Numbers** Business name Business name (EIN) you have used in the last 8 years Business name Business name Include trade names and doing business as names Business name Business name

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Del	btor 1	Scott M. Smith			Case number (if know	vn)	
			About Debtor 1:		About Debtor 2	(Spouse Only in a Joint Case):	
5.	Where	you live			EIN EIN	at a different address:	
			305 Medora St. Number Street		Number Street		
			Auburndale	FL 33823	0.5	Out 7D Out	
			City Polk	State ZIP Code	City	State ZIP Code	
			County		County		
			the one above, fill	dress is different from lit in here. Note that the notices to you at this	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.		
			Number Street		Number Street		
			P.O. Box		P.O. Box		
			City	State ZIP Code	City	State ZIP Code	
6.		y you are choosing s district to file for akruptcy	Check one:		Check one:		
			i i	180 days before filing this e lived in this district longer her district.	petition, I h	st 180 days before filing this ave lived in this district longer other district.	
			I have anothe (See 28 U.S.C	r reason. Explain. C. § 1408.)		her reason. Explain. S.C. § 1408.)	
P	art 2:	Tell the Court	About Your Bankru	ptcy Case			
7.	Bankru	apter of the		rief description of each, see N n 2010)). Also, go to the top o		U.S.C. § 342(b) for Individuals Filing ne appropriate box.	
	are cho under	oosing to file	Chapter 7				
			Chapter 11				
			Chapter 12				
			Chapter 13				

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Deb	otor 1 Scott M. Smith			Case number (if kn	own)				
8.	How you will pay the fee	cour pay	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.						
			I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).						
		By la than fee i	quest that my fee be waived (You make aw, a judge may, but is not required to a 150% of the official poverty line that a in installments). If you choose this oping Fee Waived (Official Form 103B) are	, waive your fee, and n applies to your family s ion, you must fill out th	nay do so only if your income is less ize and you are unable to pay the e Application to Have the Chapter 7				
9.	Have you filed for	☑ No							
	bankruptcy within the last 8 years?	☐ Yes.							
	·	District _		When MM/DD/	Case number				
		District _			Case number				
		District _		When	Case number				
10.	Are any bankruptcy	☑ No							
	cases pending or being filed by a spouse who is	☐ Yes							
	not filing this case with you, or by a business	Debtor _		Rela	itionship to you				
	partner, or by an affiliate?	District _			Case number, if known				
		Debtor _		Rela	itionship to you				
		District _			Case number, if known				
11.	Do you rent your residence?	✓ No. Yes.	Go to line 12. Has your landlord obtained an evict residence?	ion judgment against y	ou and do you want to stay in your				
			No. Go to line 12. Yes. Fill out Initial Statement and file it with this bankruptcy	-	nment Against You (Form 101A)				

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Debtor 1		Scott M. Smith		Case number (if known)					
P	art 3:	Report About Ar	ıy Bı	usine	sses You Own as	a Sole Proprie	etor		
12.	-	a sole proprietor ull- or part-time ss?			Go to Part 4. Name and location of b	usiness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.				Name of business, if any Number Street				
	sole pro	eve more than one prietorship, use a e sheet and attach it etition.			Single Asset Rea Stockbroker (as of	ness (as defined la	in 11 U.S.C. § 101(27 ed in 11 U.S.C. § 101	• •	ode
13.	Chapter 11 of the can solution can are you a small business or if			set ap st rece	filing under Chapter 11, ppropriate deadlines. If nt balance sheet, staten f these documents do no	you indicate that ynent of operations	ou are a small busine , cash-flow statement	ess debtor, you , and federal in	must attach your scome tax return
	debtor?		$\overline{\mathbf{A}}$	No.	I am not filing under C	hapter 11.			
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).			No.	I am filing under Chap the Bankruptcy Code.	ter 11, but I am N	OT a small business of	debtor accordir	ng to the definition in
				Yes.	I am filing under Chap Bankruptcy Code.	ter 11 and I am a	small business debto	r according to t	he definition in the
P	art 4:	Report If You Ov	vn o	r Hav	e Any Hazardous I	Property or A	ny Property That	Needs Imm	nediate Attention
14.	property alleged immine	own or have any y that poses or is to pose a threat of nt and identifiable		No Yes.	What is the hazard?				
	safety? any pro	to public health or Or do you own perty that needs ate attention?			If immediate attention	is needed, why is	it needed?		
	perishal livestoci	mple, do you own ble goods, or k that must be fed, or ng that needs urgent			Where is the property	Number Stree	t		
						City		State	ZIP Code

Debtor 1 Scott M. Smith Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. About Debtor 1:
You must check one:

Z' I received a briefing from an approved credit

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

П	I am not required to receive a brid	efing abou
	credit counseling because of:	

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making

rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing ab	out
credit counseling because of:	

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1	Scott M. Smith	cott M. Smith Case number (if known)					n)		
Р	art 6:	Answer These C	Question	s for	Reporting Pu	ırpos	ses			
16.	What k have?	ind of debts do you	 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. ✓ Yes. Go to line 17. 							
			r [noney f	•	-				debts that you incurred to obtain e business or investment.
			16c. S	State the	e type of debts yo	ou ow	e that are not consi	umer or busi	ness	s debts.
17.	Are you	u filing under er 7?	□ No	o. Iar	n not filing under	Chap	oter 7. Go to line 18	3.		
	any ex	Do you estimate that after any exempt property is excluded and administrative expenses	Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?							
	admini			$\overline{\checkmark}$	No					
	are paid that funds will be available for distribution to unsecured creditors?				Yes					
18.		any creditors do timate that you	10	19 -99 0-199 0-999			1,000-5,000 5,001-10,000 10,001-25,000			25,001-50,000 50,001-100,000 More than 100,000
19.		uch do you te your assets to th?	\$5 \$1	00,001-	0 100,000 \$500,000 \$1 million		\$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50	million) million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20.		uch do you te your liabilities to	□ \$5 ☑ \$1	00,001-	0 100,000 \$500,000 \$1 million		\$1,000,001-\$10 m \$10,000,001-\$50 \$50,000,001-\$100 \$100,000,001-\$50	million O million		\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Р	art 7:	Sign Below								
For	you		I have a		ed this petition, a	nd I d	eclare under penalt	ty of perjury	that	the information provided is true
			If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.							
				-	•		d not pay or agree to d and read the notic			who is not an attorney to help me U.S.C. § 342(b).
			I reques	st relief	in accordance w	ith the	chapter of title 11,	United State	es C	ode, specified in this petition.
			connec	tion with	-	ase ca	an result in fines up	•	-	money or property by fraud in imprisonment for up to 20 years,
					1. Smith			X Cianatus		Dobtos 2
					nith, Debtor 1			ŭ		Debtor 2
			⊏xe	Juled O	n <u>07/06/2017</u> MM / DD / YYY	Υ		Execute	u on	MM / DD / YYYY

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Debtor 1	Scott M. Smith		Case number (if knowr	n)				
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.		I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.						
		X /s/ G. Donald Golden, Esquire Signature of Attorney for Debtor	Date	07/06/2017 MM / DD / YYYY				
		G. Donald Golden, Esquire Printed name The Golden Law Group Firm Name 808 Oakfield Dr Number Street						
		Brandon City	FL State	33511 ZIP Code				
		Contact phone (813) 413-8700	Email address don@l	brandonlawyer.com				
		0137080 Bar number	FL State	_				

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Debtor 1	Scott First Name	M. Middle Name	Smith Last Name		
Debtor 2 (Spouse, if filing	g) First Name	Middle Name	Last Name		
United States E	Bankruptcy Court fo	r the: MIDDLE DIST	RICT OF FLORIDA		
Case number (if known)				Check if this is an amended filing	
——————————————————————————————————————	m 106Sum			•	
	of Your Asse	ets and Liabilit	ies and Certain Statis	ical Information	12/1
ummary (

own \$263,000.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$14,708.00 1b. Copy line 62, Total personal property, from Schedule A/B..... \$277,708.00 1c. Copy line 63, Total of all property on Schedule A/B..... Part 2: **Summarize Your Liabilities** Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D..... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$115,275.28 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....+

Your total liabilities \$423,514.26

Part 3: Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$8,659.20
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$8,130.00

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Deb	tor 1	Scott M. Smith Case numb	per (if known)
P	art 4	Answer These Questions for Administrative and Statistical Reco	rds
6.	Are	you filing for bankruptcy under Chapters 7, 11, or 13?	
		No. You have nothing to report on this part of the form. Check this box and submit this form. Yes	rm to the court with your other schedules.
7.	Wha	at kind of debt do you have?	
	$\overline{\mathbf{V}}$	Your debts are primarily consumer debts. Consumer debts are those "incurred by an if family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.	. , , ,
		Your debts are not primarily consumer debts. You have nothing to report on this part of this form to the court with your other schedules.	of the form. Check this box and submit
8.		m the Statement of Your Current Monthly Income: Copy your total current monthly incorcial Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	ne from \$7,216.03
9.	Сор	by the following special categories of claims from Part 4, line 6 of Schedule E/F:	
			Total claim
	Fro	m Part 4 on <i>Schedule E/F,</i> copy the following:	
	9a.	Domestic support obligations. (Copy line 6a.)	\$0.00
	9b.	Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
	9c.	Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
	9d.	Student loans. (Copy line 6f.)	\$0.00
	9e.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
	9f.	Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00
	9g.	Total. Add lines 9a through 9f.	\$0.00

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Fill in this in	formation to i	dentify your ca	se and this filing:		
Debtor 1	Scott First Name	M. Middle Name	Smith Last Name		
Debtor 2 (Spouse, if filing	j) First Name	Middle Name	Last Name		
		r the: MIDDLE DIS	STRICT OF FLORIDA		
Case number	armaptoy Court to	<u></u>		□ Chash	if this is an
(if known)				_	if this is an ded filing
Official Forn	n 106A/B				
Schedule A	VB: Propert	y			12/15
Part 1: De 1. Do you own No. Go	escribe Each F or have any legal to Part 2.	any additional page Residence, Buil	olying correct information. If more es, write your name and case num ding, Land, or Other Real Estest in any residence, building, land	ber (if known). Answer even	ery question.
∀ Yes. W	here is the proper	ty?			
1.1. 277 Little Town Street address, if ava	n Quarter ailable, or other descrip	Check	s the property? all that apply. ngle-family home	amount of any secured cla Creditors Who Have Clain	ns Secured by Property.
			plex or multi-unit building ondominium or cooperative	Current value of the entire property?	Current value of the portion you own?
Williamsburg City			anufactured or mobile home	\$263,000.00	\$263,000.00
	oldic Zii		restment property neshare her Debtor's Non-Homestead I	Describe the nature of you interest (such as fee sim entireties, or a life estate	ple, tenancy by the
County		Who h	as an interest in the property?	Fee Simple	
Deptor's Non-P	Homestead Prop	✓ Check ✓ De	one. Sebtor 1 only Sebtor 2 only Sebtor 1 and Debtor 2 only Least one of the debtors and another	Check if this is comm (see instructions)	nunity property
			information you wish to add about	this item, such as local	
	•	•	all of your entries from Part 1, incl Write that number here	• •	\$263,000.00
Part 2: De	escribe Your V	/ehicles			
Do you own, leas	se, or have legal o	or equitable interes	st in any vehicles, whether they are tle, also report it on <i>Schedule G: Exe</i>	_	-
3. Cars, vans,	trucks, tractors, s	sport utility vehicle	es, motorcycles		
□ No ☑ Yes					

Official Form 106A/B Schedule A/B: Property page 1

$\textbf{Caase} 881.779 \text{likk} 99.99.355 \text{KRRM} \quad \textbf{DDocc} 11.1 \quad \textbf{Filibel} \text{d} \textbf{D000} \text{61.17} \quad \textbf{PRagge} \textbf{e} 11.106 \text{ f} 71.0$

Deb	otor 1	Scott M.	Smith	С	ase number (if known)	
3.1. Mal			Honda	Who has an interest in the property? Check one.	Do not deduct secured cla amount of any secured cla Creditors Who Have Clain	ims on Schedule D:
Mod			Accord 2013	Debtor 1 only Debtor 2 only	Current value of the	Current value of the
				Debtor 1 and Debtor 2 only	entire property?	portion you own?
		mileage:	51,000	At least one of the debtors and another	er \$11,093.00	\$11,093.00
201 mil	es)		I (approx. 51000 A215409	Check if this is community property (see instructions)	,	
4.		les: Boats		s and other recreational vehicles, other venal watercraft, fishing vessels, snowmobiles,		
5.				own for all of your entries from Part 2, ind r Part 2. Write that number here		\$11,093.00
P	art 3:	Descr	ibe Your Personal	and Household Items		
Do	you own	or have a	nny legal or equitable i	nterest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.		-	s and furnishings appliances, furniture, lir	nens, china, kitchenware		
	▼ Yes	s. Describ	e Table 2 Chairs Bed Dresser Night Stand Patio Furniture Grill			\$750.00
7.	Electro Example	les: Televi	·	, video, stereo, and digital equipment; comp devices including cell phones, cameras, med		
	☐ No ☑ Yes		e Cell Phone Television			\$200.00
8.	Examp		es and figurines; painti	ngs, prints, or other artwork; books, pictures, collections; other collections, memorabilia, c	•	
	-	s. Describ	e			
9.	Examp	les: Sports		e, and other hobby equipment; bicycles, poo tools; musical instruments	l tables, golf clubs, skis;	
	<u> </u>	s. Describ	e			
10.	✓ No	les: Pistols	-	unition, and related equipment		
	LITES	s. Describ	Ե			

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Deb	101 1 <u>50</u>	cott M. Smith	Case number (if known)	
11.	Clothes			
	•	Everyday clothes, furs, le	eather coats, designer wear, shoes, accessories	
	□ No			4400.00
	Yes. [Describe Debtor's C	othing	\$100.00
12.	Jewelry			
	-	Everyday jewelry, costun gold, silver	ne jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	□ No ☑ Yes. [Describe Watch		\$10.00
13.	Non-farm Examples:	animals Dogs, cats, birds, horses	;	
	√ No			
		Describe		
14.	-	•	d items you did not already list, including any health aids you	
	did not lis	t		
	✓ No	0:		
	_	Give specific ation		
45	A -1 -1 411	allan colors of all of cocon	antico from Bort 2 including any article for many and	
15.			entries from Part 3, including any entries for pages you have ber here	\$1,060.00
		Dagarika Varus Finan	scial Access	
F	rt 4:	Describe Your Finar	iciai Assets	
Do y	ou own or	have any legal or equita	ble interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Examples:	Money you have in your petition	wallet, in your home, in a safe deposit box, and on hand when you file your	
	□ No			
	Yes		Cash:	\$1,700.00
17.	Deposits of Examples:	Checking, savings, or otl	her financial accounts; certificates of deposit; shares in credit unions, other similar institutions. If you have multiple accounts with the same	
		mstitution, iist each.		
	□ No	institution, list each.		
	_		Institution name:	
	L		Institution name: Checking account with BayPort Credit Union	\$0.00
	Yes		Checking account	\$0.00 \$100.00
	Yes	Checking account:	Checking account with BayPort Credit Union Checking account w/	
	Yes 17.1. 17.2.	Checking account: Checking account:	Checking account with BayPort Credit Union Checking account w/ Wells Faro Bank Savings account	\$100.00
18.	Yes 17.1. 17.2. 17.3. 17.4. Bonds, me	Checking account: Checking account: Savings account: Savings account:	Checking account with BayPort Credit Union Checking account w/ Wells Faro Bank Savings account with BayPort Credit Union Savings account w/ Wells Fargo Bank	\$100.00
18.	Yes 17.1. 17.2. 17.3. 17.4. Bonds, mi Examples: ✓ No	Checking account: Checking account: Savings account: Savings account:	Checking account with BayPort Credit Union Checking account w/ Wells Faro Bank Savings account with BayPort Credit Union Savings account w/ Wells Fargo Bank raded stocks accounts with brokerage firms, money market accounts	\$100.00

$\textbf{C2asse} 881.179 \text{likk} 959335 \text{KRRM} \quad \textbf{D2occ1} 11 \quad \textbf{Filibel} \\ \textbf{d20770661.17} \quad \textbf{P3agge} 1.8306 \\ \textbf{f71} \textbf{0}$

Debt	or 1 Scott M. Smith	Case number (if known)
	Non-publicly traded stock and interests in incorporated and unincorporate an interest in an LLC, partnership, and joint venture	ed businesses, including
	✓ No Yes. Give specific information about them	% of ownership:
	Government and corporate bonds and other negotiable and non-negotiable Negotiable instruments include personal checks, cashiers' checks, promissory Non-negotiable instruments are those you cannot transfer to someone by significant transfer to some one of the source of	notes, and money orders.
	✓ No Yes. Give specific information about them Issuer name:	
21.	Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accouprofit-sharing plans	unts, or other pension or
	 ✓ No Yes. List each account separately. Type of account: Institution name: 	
	Security deposits and prepayments Your share of all unused deposits you have made so that you may continue set <i>Examples:</i> Agreements with landlords, prepaid rent, public utilities (electric, ga companies, or others	· ·
	✓ No ✓ Yes Institution name or individual:	
23.	Annuities (A contract for a specific periodic payment of money to you, either f	or life or for a number of years)
	✓ No ☐ Yes Issuer name and description:	
	Interests in an education IRA, in an account in a qualified ABLE program, 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	or under a qualified state tuition program.
	✓ No✓ Yes Institution name and description. Separately file th	ne records of any interests 11 U.S.C. 8 521(c)
	Trusts, equitable or future interests in property (other than anything listed powers exercisable for your benefit	
	✓ No☐ Yes. Give specific information about them	
26.	Patents, copyrights, trademarks, trade secrets, and other intellectual prop Examples: Internet domain names, websites, proceeds from royalties and licer	• •
	✓ No Yes. Give specific information about them	
27.	Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holding	ngs, liquor licenses, professional licenses
	✓ No Yes. Give specific information about them	

$\textbf{Casse881.179 lkk9593.55 kKRM DDoc111} \ \ \textbf{Filibeld007/0661.17} \ \ \textbf{Pagge114} 406 f71.0$

Deb	tor 1 Scott M. Smith	Case number (if known)	
Mor	ney or property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you		
	✓ No Yes. Give specific information about them, including whether you already filed the returns and the tax years	Fed Stat Loca	
29.	Family support Examples: Past due or lump sum alimony, spousal support, child support, maint	enance, divorce settlement, prop	erty settlement
	✓ No ☐ Yes. Give specific information	Alimony:	
		Maintenance:	
		Support:	
		Divorce settlem	ent:
		Property settlen	nent:
30.	Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick compensation, Social Security benefits; unpaid loans you made to so No No Yes. Give specific information Money owed to Debtor by brother		\$500.00
31.	Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); cre No Yes. Name the insurance company of each policy and list its value	edit, homeowner's, or renter's ins Beneficiary:	urance Surrender or refund value: Unknown
32.	Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance pentitled to receive property because someone has died No Yes. Give specific information	policy, or are currently	
33.	Claims against third parties, whether or not you have filed a lawsuit or made Examples: Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim	e a demand for payment	
34.	Other contingent and unliquidated claims of every nature, including counterrights to set off claims No Yes. Describe each claim	claims of the debtor and	
35.	Any financial assets you did not already list		
	✓ No✓ Yes. Give specific information		
36.	Add the dollar value of all of your entries from Part 4, including any entries attached for Part 4. Write that number here		\$2,555.00

$\textbf{C2asse} 881.179 \text{likk} 959335 \text{KRRM} \quad \textbf{D2occ1} 11 \quad \textbf{Filibel} \\ \textbf{d20770661.17} \quad \textbf{P3agge} 15506 \\ \textbf{f71} \textbf{0}$

Debtor 1		Scott M. Smith Ca	Case number (if known)			
Pa	rt 5:	Describe Any Business-Related Property You Own or Have a	an Interest In.	List any real estate	in Part 1.	
37.	Do you	u own or have any legal or equitable interest in any business-related prope	rty?			
	⋈ No	o. Go to Part 6.				
	Ye	s. Go to line 38.				
				Current value portion you o Do not deduct	wn? secured	
38.	Accou	nts receivable or commissions you already earned		claims or exe	nptions.	
	✓ No	os. Describe				
39.		equipment, furnishings, and supplies les: Business-related computers, software, modems, printers, copiers, fax macdesks, chairs, electronic devices	hines, rugs, teleph	hones,		
	✓ No	s. Describe				
40.	Machi	nery, fixtures, equipment, supplies you use in business, and tools of your t	rade			
	✓ No □ Ye	ss. Describe				
41.	Invent	ory				
	✓ No	s. Describe				
42.	Interes	sts in partnerships or joint ventures				
	√ No					
		s. Describe Name of entity:	% of ov	wnership:		
43.	Custor	mer lists, mailing lists, or other compilations				
	✓ No □ Ye	ss. Do your lists include personally identifiable information (as defined in 1° No Yes. Describe	1 U.S.C. § 101(41.	A))?		
44.	Any bu	usiness-related property you did not already list				
	✓ No	s. Give specific information.				
		ee dollar value of all of your entries from Part 5, including any entries for pa ed for Part 5. Write that number here	• .	→	\$0.00	
Pa	rt 6:	Describe Any Farm- and Commercial Fishing-Related Proper If you own or have an interest in farmland, list it in Part 1.	rty You Own c	or Have an Interest In		
46.	Do you	u own or have any legal or equitable interest in any farm- or commercial fis	hing-related prop	perty?		
	<u>-</u>	o. Go to Part 7. ss. Go to line 47.				

Official Form 106A/B Schedule A/B: Property page 6

$\textbf{Casse881.179 lkk9593.55 kKRRM} \quad \textbf{DDocc111} \quad \textbf{Filibeld007/0661.17} \quad \textbf{PRagge1.66} co6 f7 1.0$

Deb	tor 1	Scott M. Smith	Case number (if known)	
				Current value of the portion you own? Do not deduct secured claims or exemptions.
47.	Farm a	nimals es: Livestock, poultry, farm-raised fish		
	✓ No ☐ Yes			
48.	Crops	either growing or harvested		
		. Give specific rmation		
49.	Farm a	nd fishing equipment, implements, machinery, fixtures, and tools of tra	ade	
	✓ No ☐ Yes			
50.	Farm a	nd fishing supplies, chemicals, and feed		
	✓ No ☐ Yes			
51.	Any far	m- and commercial fishing-related property you did not already list		
		. Give specific rmation		
52.		dollar value of all of your entries from Part 6, including any entries for Part 6. Write that number here		\$0.00
Pa	art 7:	Describe All Property You Own or Have an Interest in Tha	at You Did Not List Above	
53.		have other property of any kind you did not already list? es: Season tickets, country club membership		
	✓ No ☐ Yes	. Give specific information.		
54.	Add the	dollar value of all of your entries from Part 7. Write that number here	→	\$0.00

Official Form 106A/B Schedule A/B: Property page 7

Casse88117791kk959335kKRRM DDocc111 Filiteld0077066117 Fragge117706f710

Deb	otor 1	Scott M. Smith	Case nu	ımber (if known)		
Р	art 8:	List the Totals of Each Part of this Form				
55.	Part 1:	Total real estate, line 2			→	\$263,000.00
56.	Part 2:	Total vehicles, line 5	\$11,093.00			
57.	Part 3:	Total personal and household items, line 15	\$1,060.00			
58.	Part 4:	Total financial assets, line 36	\$2,555.00			
59.	Part 5:	Total business-related property, line 45	\$0.00			
60.	Part 6:	Total farm- and fishing-related property, line 52	\$0.00			
61.	Part 7:	Total other property not listed, line 54	+\$0.00			
62.	Total p	personal property. Add lines 56 through 61	\$14,708.00	Copy personal property total	,	+\$14,708.00
63.	Total c	of all property on Schedule A/B. Add line 55 + line 62				\$277,708.00

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	Scott	М.	Smith				
Debtor 2	First Name	Middle Nam	ne Last Name				
(Spouse, if filing)		Middle Nam					
	nkruptcy Court fo	or the: MIDDLE	DISTRICT OF FLOR	RIDA	<u> </u>	Check if this is an	
Case number (if known)				<u> </u>		amended filing	
Official Form	106C						
Schedule C	: The Prope	erty You C	laim as Exemp	ot			04/16
Using the property	you listed on Sciill out and attach	thedule A/B: Prop to this page as n	perty (Official Form 106	6A/B)	as your source, list the	esponsible for supplying correct info e property that you claim as exempt ssary. On the top of any additional	. If more
is to state a speci exempted up to the receive certain be exemption of 100	ific dollar amoun ne amount of any enefits, and tax-e % of fair market	nt as exempt. A y applicable sta exempt retireme value under a la	lternatively, you may atutory limit. Some ex ent fundsmay be unl	clair cemp limite emptic	n the full fair market tionssuch as those d in dollar amount. H on to a particular doll	you claim. One way of doing so value of the property being for health aids, rights to dowever, if you claim an ar amount and the value of the le statutory amount.	
Part 1: Ide	entify the Pro	perty You Cl	aim as Exempt				
1. Which set of	exemptions are	you claiming?	Check one only,	even	if your spouse is filing	with you.	
✓ You are	claiming state an	nd federal nonbar	nkruptcy exemptions. U.S.C. § 522(b)(2)			ŕ	
2. For any prop	erty you list on	Schedule A/B th	hat you claim as exen	npt, f	ill in the information	below.	
Brief description of the property and line on Schedule A/B that lists this property			Current value of the portion you own	ne portion you exemption you cla		Specific laws that allow exempt	ion
			Copy the value from Schedule A/B		eck only one box for h exemption		
			\$11.093.00	$\overline{\mathbf{Q}}$	\$0.00	Fla. Stat. Ann. § 222.25(1)	
2013 Honda Acc VIN: 1HGCR2F5	7DA215409	51000 miles)	Ψ11,033.00		100% of fair market value, up to any applicable statutory limit		
2013 Honda Acc VIN: 1HGCR2F5 Line from Schedule Brief description:	7DA215409	51000 miles)	\$750.00		value, up to any applicable statutory	Fla. Stat. Ann. § 222.25(4)	
2013 Honda Acc VIN: 1HGCR2F5 Line from Schedul Brief description: Table	7DA215409	51000 miles)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		value, up to any applicable statutory limit \$750.00 100% of fair market	Fla. Stat. Ann. § 222.25(4)	
2013 Honda Acc VIN: 1HGCR2F5 Line from Schedule Brief description: Table 2 Chairs Bed	7DA215409	51000 miles)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		value, up to any applicable statutory limit \$750.00 100% of fair market value, up to any applicable statutory	Fla. Stat. Ann. § 222.25(4)	
2013 Honda Acc VIN: 1HGCR2F5 Line from Schedule Brief description: Table 2 Chairs Bed Dresser Night Stand Patio Furniture	7DA215409	51000 miles)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		value, up to any applicable statutory limit \$750.00 100% of fair market value, up to any	Fla. Stat. Ann. § 222.25(4)	
Brief description: 2013 Honda Acc VIN: 1HGCR2F5 Line from Schedul Brief description: Table 2 Chairs Bed Dresser Night Stand Patio Furniture Grill	67DA215409 e A/B: 3.1	51000 miles)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		value, up to any applicable statutory limit \$750.00 100% of fair market value, up to any applicable statutory	Fla. Stat. Ann. § 222.25(4)	
2013 Honda Acc VIN: 1HGCR2F5 Line from Schedule Brief description: Table 2 Chairs Bed Dresser Night Stand Patio Furniture	67DA215409 e A/B: 3.1	51000 miles)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		value, up to any applicable statutory limit \$750.00 100% of fair market value, up to any applicable statutory	Fla. Stat. Ann. § 222.25(4)	
2013 Honda Acc /IN: 1HGCR2F5 Line from Schedule Brief description: Table Chairs Bed Dresser Night Stand Patio Furniture Grill Line from Schedule	67DA215409 The A/B: 3.1 The A/B: 6	ad exemption of	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	value, up to any applicable statutory limit \$750.00 100% of fair market value, up to any applicable statutory limit		

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Debtor 1	Scott M. Smith		Case number	(if known)
Part 2:	Additional Page			
	iption of the property and line on \B that lists this property	Current value of the portion you own	ount of the emption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	eck only one box for ch exemption	
Brief descrip Cell Phone Television Line from Se	e	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.25(4)
Brief descrip Debtor's C Line from Se		\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.25(4)
Brief descrip Watch Line from Se	otion: chedule A/B: 12	\$10.00	\$10.00 100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.25(4)
	ption: ption claimed for this asset) chedule A/B:16	\$1,700.00	\$1,000.00 100% of fair market value, up to any applicable statutory limit	Fla. Const. art. X, § 4(a)(2)
	nption claimed for this asset) chedule A/B:16	\$1,700.00	\$700.00 100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.25(4)
-		\$0.00	\$0.00 100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.25(4)
=		\$5.00	\$5.00 100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.25(4)
Wells Fard	account w/	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.25(4)
Brief descrip Savings a Wells Farg Line from So	ccount w/	\$250.00	\$250.00 100% of fair market value, up to any applicable statutory limit	Fla. Stat. Ann. § 222.25(4)

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	Case number	r (if known)
Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Check only one box for each exemption	
\$500.00	\$500.00 100% of fair market	Fla. Stat. Ann. § 222.25(4)
	applicable statutory	
Unknown	☐ 100% of fair market value, up to any applicable statutory	Fla. Stat. Ann. § 222.13
	the portion you own Copy the value from Schedule A/B \$500.00	Current value of the portion you own Copy the value from Schedule A/B \$500.00 Check only one box for each exemption \$500.00 State of the exemption one box for each exemption The policy of fair market value, up to any applicable statutory limit Unknown The policy of fair market value, up to any any august of fair market value, up to any august of fair market value, up to any

Casse88117791kk9599355KKRRM DDocc111 Filibelc0077066117 Flagge221106f710

Fill in this inf	ormation to ide	entify your case	:				
Debtor 1	Scott	M.	Smith				
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
		he: MIDDI E DIST	RICT OF FLORIDA				
	inkruptcy Court for the	ne. Middel dist	RICT OF TEORIDA				
Case number (if known)					Check if this is amended filing		
	1000				amended ming	3	
Official Form				_			
Schedule D:	Creditors W	Vho Have Cla	ims Secured by	y Property		12/15	
correct information On the top of any 1. Do any credit No. Che Yes. Fill Part 1: Lis 2. List all secure claim, list the correditor has a	No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below. Part 1: List All Secured Claims List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form. Column B Value of collateral that supports this						
2.1		Describe the secures the	property that	\$18,373.00	\$11,093.00	\$7,280.00	
Carmax Auto Fin	nance		a Accord (approx.			•	
P.O.Box 440609			s) VIN: 1HGCR				
Number Street							
		As of the da	te you file, the claim is	: Check all that apply.			
Kennesaw	GA 30160	Continge					
City	State ZIP Code	Unliquida	aled 				
Who owes the deb	ot? Check one.	_	n. Check all that apply.				
Debtor 1 only			ement you made (such a		car loan)		
Debtor 2 only) - l- t 0 l- :	☐ Statutory	lien (such as tax lien, m	nechanic's lien)			
Debtor 1 and D	Debtor 2 only the debtors and an	other \Box	nt lien from a lawsuit				
_		V Outer (iii	cluding a right to offset)				
Check if this of to a community		Purcha	se Money				
Date debt was inc	urred	Last 4 digits	of account number	8 1 3 4			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$18,373.00

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Debtor 1	Scott M. Smith		_ Case number (if	known)	
Part 1: Additional Page After listing any entries on sequentially from the previous			Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.2 Ditech Creditor's nam P.O. Box 6 Number Str		Describe the property that secures the claim: Debtor's Non-Homestead Property	\$287,179.98	\$263,000.00	\$24,179.98
Debtor 2 Debtor 2 Debtor 3 Debtor 3 At least Check i	State ZIP Code the debt? Check one. I only	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, multiple) Judgment lien from a lawsuit Other (including a right to offset) Mortgage	s mortgage or secured	car loan)	
Date debt w	as incurred	_ Last 4 digits of account number	5 3 6 9		
Z.3 Kingsmill Creditor's nam 309 McLav Number Str	vs Circle	Describe the property that secures the claim: Debtor's Non-Homestead Property	\$2,686.00	\$263,000.00	\$2,686.00
Debtor 2 Debtor 2 Debtor 2 Debtor 3 Debtor 3 Check i	State ZIP Code the debt? Check one. I only	As of the date you file, the claim is: Contingent Unliquidated Disputed Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, multiple) Judgment lien from a lawsuit Other (including a right to offset) Homeowner Association Fee	s mortgage or secured echanic's lien)	car loan)	
Date debt w	as incurred	_ Last 4 digits of account number			
Williamsb	urg/James City County				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$289,865.98

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$308,238.98

Casse88117791kk9599355KKRRM DDocc111 Filibelc0077066117 Fragge22306f710

Debtor 1	Scott M. Smith			Case number (if known)	
Part 2	2: List Others to Be Notified	l for a	Debt That Yo	u Already Listed	
example then list list the a	e, if a collection agency is trying to co t the collection agency here. Similarly	llect fro y, if you	m you for a debt have more than	uptcy for a debt that you already listed in Part 1. For you owe to someone else, list the creditor in Part 1, and one creditor for any of the debts that you listed in Part 1, as to be notified for any debts in Part 1, do not fill out or	
	BEE Law Group, LLC Name 6003 Executive Blvd, Suite 101 Number Street			On which line in Part 1 did you enter the creditor? Last 4 digits of account number	2.2
	Rockville City	MD State	20852 ZIP Code		
	Dankos, Gordon & Tucker, P. C. Name 1360 E. Parham Road, Suite 200 Number Street			On which line in Part 1 did you enter the creditor? Last 4 digits of account number	2.3
	Richmond City	VA State	23227 ZIP Code		

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Fill in this inf	ormation to i	dentify your case	:	
Debtor 1	Scott First Name	M. Middle Name	Smith Last Name	
Debtor 2	i iist Name	Middle Name	Last Name	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court fo	or the: MIDDLE DIST	RICT OF FLORIDA	
Case number (if known)				Check if the

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

- 1. Do any creditors have priority unsecured claims against you?
 - No. Go to Part 2.

☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.

Total claim	Priority	Nonpriority
	amount	amount

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Debtor 1	Scott M. Smith	Case number (if known)
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims
N ✓ Y 4. List all If a cree type of	es I of your nonpriority unsecured claims ditor has more than one nonpriority unsecured inclaim it is. Do not list claims already incl	claims against you? Submit this form to the court with your other schedules. in the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what uded in Part 1. If more than one creditor holds a particular claim, list the other creditors in unsecured claims, fill out the Continuation Page of Part 2.
Columbus City Who incurr Debtor Debtor At least Check	State ZIP Code ed the debt? Check one. 1 only	\$600.00 Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card
Yes 4.2 Bank of A Nonpriority Cr PO Box 1! Number Wilmingto City Who incurr Debtor Debtor Debtor At least Check	editor's Name 5312 Street DE 19850 State ZIP Code ed the debt? Check one. 1 only	\$16,000.00 Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card

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Debtor 1 Scott M. Smith	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.3		\$20,000.00
BayPort Credit Union	Last 4 digits of account number 7 7 5 1	
Nonpriority Creditor's Name 3711 Huntington Avenue	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Newport News VA 23607 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	✓ Other. Specify Deficiency on Foreclosed Mortgage	
Is the claim subject to offset?	3.3	
☑ No		
Yes		
4.4		\$5,000.00
BayPort Credit Union	Last 4 digits of account number	
Nonpriority Creditor's Name 3711 Huntington Avenue	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	— ☐ Disputed	
Newport News VA 23607 City State ZIP Code	— Target ANONDRIORITY are assured alsima	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
No Vas		
Yes Mastercard		
4.5		\$2,000.00
Ronpriority Creditor's Name	Last 4 digits of account number	
c/o Capital One Retail Services	When was the debt incurred?	
Number Street P.O. Box 5893	As of the date you file, the claim is: Check all that apply. — Contingent	
	Unliquidated	
Carol Stream IL 60197	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset? ✓ No		
Yes		

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Scott M. Smith	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	em sequentially from the	Total claim
4.6		\$900.00
Capital One	Last 4 digits of account number	
Nonpriority Creditor's Name PO Box 30285	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Salt Lake City UT 84130-0285 City State ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Credit Card	
Is the claim subject to offset?	Crount Gura	
✓ No Yes		
4.7		\$12,000.00
Casey Auto Group Nonpriority Creditor's Name	Last 4 digits of account number	
813 Diligence Dr. #117	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated ☐ Unliquidated ☐ Contingent	
Novement Nove	Disputed	
Newport News VA 23606 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Deficiency on Repossessed Vehicle	
Is the claim subject to offset?		
No Ves		
Yes		
4.8		\$400.00
Chase Bank, USA, N.A.	Last 4 digits of account number 4 8 7 8	
Nonpriority Creditor's Name PO Box 15153	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	☐ Unliquidated ☐ Disputed	
Wilmington DE 19886		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	Grount dard	
☑ No		
☐ Yes		

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Scott M. Smith	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.9		\$900.00
Cox Communications	Last 4 digits of account number	
Nonpriority Creditor's Name P.O. Box 79175	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Phoenix AZ 85062		
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
–	Other. Specify	
Check if this claim is for a community debt	Unpaid Utilities	
Is the claim subject to offset? ✓ No		
Yes		
4.10	Local & dimital of account wombon	\$1,141.34
Cox Communications Nonpriority Creditor's Name	Last 4 digits of account number	
P.O. Box 79175	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
Discouries 47 05000	Disputed	
Phoenix AZ 85062 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	Cilpula Cililia	
☑ No		
Yes		
4.11		\$600.00
Credit One Bank	Last 4 digits of account number 3 8 7 7	
Nonpriority Creditor's Name	When was the debt incurred?	
P.O.Box 60500 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	Unliquidated	
City of Industry CA 91716	─ □ Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No ☐ Yes		

Debtor 1 Scott M. Smith	Case number (if known)	
Part 2: Your NONPRIORITY Unsec	ured Claims Continuation Page	
After listing any entries on this page, number the previous page.	nem sequentially from the	Total claim
4.12		\$8,733.94
Discover Bank	Last 4 digits of account number 3 3 7 8	
Nonpriority Creditor's Name 502 E Market St	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated	
	— ☐ Disputed	
Greenwood DE 19950 City State ZIP Code	Time of NONDRIORITY was a sound a laim.	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: ☐ Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
No You		
Yes		
4.13		\$12,000.00
Kingsmill Country Club	Last 4 digits of account number	
Nonpriority Creditor's Name 1010 Kingsmill Rd,	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated	
William shares VA 02405	Disputed	
Williamsburg VA 23185 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Consumer Services	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.14		\$14,000.00
PROSPER	Last 4 digits of account number	
Nonpriority Creditor's Name 221 Main Street Suite 300	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated	
San Francisco CA 94105	Disputed	
San Francisco CA 94105 City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No □ Yes		

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Debtor 1 Scott M. Smith	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.15		\$15,000.00
PROSPER	Last 4 digits of account number	
Nonpriority Creditor's Name 221 Main Street Suite 300	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	☐ Unliquidated ☐ Disputed	
San Francisco CA 94105 City State ZIP Code	Turns of NONDRIGHTY unpossured slaims	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
✓ No Yes		
4.16		\$4,000.00
THD/CBSD	Last 4 digits of account number 9 5 6 1	
Nonpriority Creditor's Name P.O.Box 6497	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent Unliquidated	
	— ☐ Disputed	
Sioux Falls SD 57117 City State ZIP Code	Time of NONDRIORITY images and element	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim: Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Credit Card	
Is the claim subject to offset?		
☑ No ☐ Yes		
4.17		\$2,000.00
Wells Fargo Bank Nonpriority Creditor's Name	Last 4 digits of account number	
P.O. Box 14542	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply. — — Contingent	
	Unliquidated	
Des Moines IA 50306	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one. Debtor 1 only	Student loans	
Debtor 1 only Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	☑ Other. Specify	
Check if this claim is for a community debt	Line of Credit	
Is the claim subject to offset? ✓ No		
Yes		

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Debtor 1 Scott I	M. Smith			Case number (if known)
Part 3: List	Others to Be	e Notified Ab	out a Debt That You Already	/ Listed
For example, if creditor in Part	a collection ag s 1 or 2, then I listed in Parts	gency is trying t ist the collectio 1 or 2, list the a	to collect from you for a debt you on a gency here. Similarly, if you hand ditional creditors here. If you do	a debt that you already listed in Parts 1 or 2. bwe to someone else, list the original live more than one creditor for any of the not have additional parties to be notified for
Capital Manageme	ent Services,	LP	On which entry in Part 1 or F	art 2 did you list the original creditor?
Name <mark>698 1/2 South Og</mark> o	den Street		Line 4.12 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Number Street				Part 2: Creditors with Nonpriority Unsecured Claims
Buffalo City	NY State	14206 ZIP Code	Last 4 digits of account num	ber
Central Credit Sei	rvices Inc.		On which entry in Part 1 or F	Part 2 did you list the original creditor?
Name P.O.Box 15118 Number Street			Line 4.10 of (Check one):	□ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims
Jacksonville City	FL State	32239 ZIP Code	Last 4 digits of account num	ber
Northstar Locatio	n Services, Ir	nc.	On which entry in Part 1 or F	art 2 did you list the original creditor?
Name 4285 Genesee Str Number Street	eet		Line 4.2 of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number Street				Part 2: Creditors with Nonpriority Unsecured Claims
Buffalo	NY	14225	—— Last 4 digits of account num	ber
City	State	ZIP Code		

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Debtor 1	Scott M. Smith	Case number (if known)
Part 4:	Add the Amounts for Each Type of Unsecured Claim	

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a.	Domestic support obligations	6a. \$0.00
nom runt r	6b.	Taxes and certain other debts you owe the government	6b. \$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c. \$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$0.00
	6e.	Total. Add lines 6a through 6d.	6d. \$0.00
			Total claim
Total claims from Part 2	6f.	Student loans	6f. \$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h. \$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	^{6i.} +\$115,275.28
	6j.	Total. Add lines 6f through 6i.	6j. \$115,275.28

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Fill in this inf	ormation to	identify your case	:			
Debtor 1	Scott First Name	M. Middle Name	Smith Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court fo	or the: MIDDLE DIST	RICT OF FLORIDA			
Case number (if known)				_	Check if this is an amended filing	
Official Form	106G					
Schedule G	: Executor	y Contracts an	d Unexpired Leases			12/1
correct information	on. If more space	ce is needed, copy the	ed people are filing together, k additional page, fill it out, nu d case number (if known).			
1. Do you have	any executory	contracts or unexpired	d leases?			

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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Fill in this inf	formation to i	dentify your case	:				
Debtor 1	Scott	М.	Smith				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Ba	nkruptcy Court fo	r the: MIDDLE DIST	RICT OF FLORIDA				
Case number				–			
(if known)				Check if this is an amended filing			
Official Form	. 106⊔						
		_					
Schedule H	: Your Cod	ebtors			12/1		
two married peop needed, copy the page. On the top	le are filing toge Additional Page	ether, both are equally e, fill it out, and numbe al Pages, write your n	responsible for supplyiner the entries in the boxes	Be as complete and accurate as possible. If g correct information. If more space is on the left. Attach the Additional Page to this known). Answer every question. pouse as a codebtor.)			
include Arizor	include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)						
<u> </u>	d your spouse, fo	rmer spouse, or legal e	quivalent live with you at th	ue time?			
person show creditor on S	n in line 2 again Schedule D (Offic	as a codebtor only if	that person is a guaranto dule E/F (Official Form 10	debtor if your spouse is filing with you. List the or or cosigner. Make sure you have listed the DEE/F), or <i>Schedule G</i> (Official Form 106G). Use			

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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Fill in this infor	mation to ide	ntify your case:						
Debtor 1	Scott	M.	Smith					
Dobtor 1	First Name	Middle Name	Last Name		Che	eck if this is:		
Debtor 2	First Name	Middle Neme	Loot Nama			An amended filing		
(Spouse, if filing)		Middle Name	Last Name	D.4	П	A supplement showing postpetition		
United States Ban Case number	kruptcy Court for	the: MIDDLE DIS	TRICT OF FLORI	DA		chapter 13 income as of the following date		
(if known)	-			_		MM / DD / YYYY		
Official Form 1	061							
Schedule I: Yo	our Income					12/15		
responsible for suppinclude information about your spouse. your name and case	olying correct inf about your spou If more space is	ormation. If you are se. If you are separ needed, attach a se rn). Answer every o	e married and not fi rated and your spot eparate sheet to thi	ling jointly, and use is not filing v	your vith y	d Debtor 2), both are equally spouse is living with you, you, do not include information any additional pages, write		
Fill in your emp information.	loyment		Dobtov 4			Dahter 2 or non filing angue		
If you have more	_		Debtor 1		□ Employed □ Not employed			
job, attach a sep with information		Employment status	✓ Employed☐ Not employedGeneral Manager					
additional emplo	yers.	cupation						
Include part-time or self-employed		nployer's name	Mahalak Auto (Froup LLC				
Occupation may student or home applies.		nployer's address	299 Cypress G	ardens Blvd		Number Street		
			Winter Haven	FL 3388 State Zip C		City State Zip Code		
			·	·				
	н	ow long employed t	nere? <u>3 Month</u>	<u> </u>				
Part 2: Give	Details About	Monthly Incom	е					
non-filing spouse unle	ess you are separa ng spouse have m	ated. ore than one employ				e, write \$0 in the space. Include your		
you need more space	, апаст а ѕерагат	e sheet to this form.		For Debtor	1	For Debtor 2 or non-filing spouse		
		y, and commission onthly, calculate wha		2. \$10,82	4.00	·		
3. Estimate and lis	st monthly overti	me pay.		3. +\$	0.00	. <u> </u>		
4. Calculate gross	income. Add lir	ne 2 + line 3.		4. \$10,82	4.00			

Official Form 106l Schedule I: Your Income page 1

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Debt	tor 1 Scott M. Smith		Case nur	mber (if knowr	1)	
			For Debtor 1	For Debto		
	Copy line 4 here	→ 4.	\$10,824.00			
5.	List all payroll deductions:					
	5a. Tax, Medicare, and Social Security deductions	5a.	\$2,164.80			
	5b. Mandatory contributions for retirement plans	5b.	\$0.00			
	5c. Voluntary contributions for retirement plans	5c.	\$0.00			
	5d. Required repayments of retirement fund loans	5d.	\$0.00			
	5e. Insurance	5e.	\$0.00			
	5f. Domestic support obligations	5f.	\$0.00			
	5g. Union dues	5g.	\$0.00			
	5h. Other deductions. Specify:	5h.	+ \$0.00			
6.	Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	 6.	\$2,164.80			
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4	1. 7.	\$8,659.20			
8.	List all other income regularly received:					
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00			
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.					
	8b. Interest and dividends	8b.	\$0.00			
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00			
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.					
	8d. Unemployment compensation	8d.	\$0.00			
	8e. Social Security	8e.	\$0.00			
	8f. Other government assistance that you regularly receive					
	Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
	Specify:	8f.	\$0.00			
	8g. Pension or retirement income	— 8g.	\$0.00			
	8h. Other monthly income.	Ū				
	Specify:	8h.,	+\$0.00			
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h	n. 9.	\$0.00			
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse	10.	\$8,659.20	+	=	\$8,659.20
11.	State all other regular contributions to the expenses that you list in Include contributions from an unmarried partner, members of your hous	Sched	ule J. our dependents, you	ır roommates,	, and othe	er
	friends or relatives.		, .,			
	Do not include any amounts already included in lines 2-10 or amounts t	hat are	not available to pay	expenses liste	ed in Sche	edule J.
	Specify:				11. +	\$0.00
	Add the amount in the last column of line 10 to the amount in line 1 income. Write that amount on the Summary of Your Assets and Liability is the applies.				12.	\$8,659.20 Combined
12	if it applies. Do you expect an increase or decrease within the year after you file	a thie fo	arm?			monthly income
	No. None.	10	·····			1
	Yes. Explain:					

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	ill in this inform	ation to identif	y your case:				1 16 41 1		
				Cyan is la		l	ck if this		
	Debtor 1	Scott First Name	M. Middle Name	Smith Last Na				ended filing	n a a tra a titi a n
	5.1.							lement showing r 13 expenses a	
	Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Na	me			ng date:	
	United States Bankru	uptcy Court for the:	MIDDLE DISTR	ICT OF FL	ORIDA		MM / D	D / YYYY	
	Case number						, 2	2,	
_	(if known)	0.1							
	fficial Form 10								
	chedule J: Yo								12/15
	•	•	•	-	ing together, both are his form. On the top	-			
	me and case numbe	•	•			o. u	y additi	onal pages, with	no you.
	art 1: Describ	be Your House	hold						
1.	Is this a joint case								
	-								
	_		parate household?	•					
	□ No								
	☐ Yes	. Debtor 2 must file	e Official Form 106J	-2, Expenses	s for Separate Househ	old of	Debtor	2.	
2.	Do you have depe	ndents?	No						
	Do not list Debtor 1 Debtor 2.	and	Yes. Fill out this infor each dependent		Dependent's relation		o to	Dependent's age	Does dependent live with you?
		nandanta'			_				□ No □ Yes
	Do not state the de names.	pendents							No Yes
									- □ Yes □ No
									Yes
									□ No
									Yes
									□ No - □ Yes
3.	Do your expenses		☑ No						_
	expenses of peop yourself and your		Yes						
		ucpenuents.							
P	art 2: Estima	te Your Ongoi	ng Monthly Exp	enses					
	•	•		•	re using this form as		•	•	
	report expenses as a form and fill in the		bankruptcy is filed	l. If this is a	supplemental Sched	dule J	, check	the box at the t	top of
	lude expenses paid		•	•					
suc	ch assistance and h	ave included it on	Schedule I: Your II	ncome (Offic	cial Form 106l.)			Your expens	ses
4.			nses for your residency rent for the ground				•	4	\$500.00
	If not included in I	ine 4:							
	4a. Real estate ta	xes					•	4a	
	4b. Property, hom	eowner's, or renter	s insurance					4b	
	4c. Home mainter	nance, repair, and u	ıpkeep expenses					4c	
	4d Homoowaarla	accociation or con-	dominium duoc					14	

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Deb	otor 1 Scott M. Smith	Case number (if known)			
		Your expenses			
5.	Additional mortgage payments for your residence, such as home equity loans	5.			
6.	Utilities:				
	6a. Electricity, heat, natural gas	6a. \$200.00			
	6b. Water, sewer, garbage collection	6b. \$100.00			
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$400.00			
	6d. Other. Specify: Storage	6d. \$200.00			
7.	Food and housekeeping supplies	7. \$500.00			
8.	Childcare and children's education costs	8. \$200.00			
9.	Clothing, laundry, and dry cleaning	9. \$200.00			
10.	Personal care products and services	10. \$100.00			
11.	Medical and dental expenses	11. \$100.00			
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$300.00			
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$100.00			
14.	Charitable contributions and religious donations	14. \$500.00			
15.	Insurance.				
	Do not include insurance deducted from your pay or included in lines 4 or 20.				
	15a. Life insurance	15a. \$200.00			
	15b. Health insurance	15b			
	15c. Vehicle insurance	15c. \$120.00			
	15d. Other insurance. Specify:	15d			
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.			
17.	Installment or lease payments:				
	17a. Car payments for Vehicle 1 Car Payment	17a. \$410.00			
	17b. Car payments for Vehicle 2	17b			
	17c. Other. Specify:	17c			
	17d. Other. Specify:	17d			
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$4,000.00			
19.	Other payments you make to support others who do not live with you. Specify:	19.			
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.				
	20a. Mortgages on other property	20a			
	20b. Real estate taxes	20b			
	20c. Property, homeowner's, or renter's insurance	20c			
	20d. Maintenance, repair, and upkeep expenses	20d			
	20e. Homeowner's association or condominium dues	20e			

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Debtor 1		Scott M. Smith	Case number (if known)			
21.	Other.					
22.	Calcul	ate your monthly expenses.				
	22a.	Add lines 4 through 21.	22a	\$8,130.00		
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b			
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$8,130.00		
23.	Calcul	ate your monthly net income.				
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$8,659.20		
	23b.	Copy your monthly expenses from line 22c above.	23b. –	\$8,130.00		
		Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$529.20		
24.	Do yo	u expect an increase or decrease in your expenses within the year after you fil	le this form?			
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?					
	☑ N					
		es. Explain here: None.				

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Fill in this in	nformation to i	dentify your case	:	
Debtor 1	Scott	M.	Smith	7
	First Name	Middle Name	Last Name	
Debtor 2	First Name	Maridalla Maria	LastNama	
(Spouse, if filing	g) First Name	Middle Name	Last Name	
United States B	ankruptcy Court fo	or the: MIDDLE DIST	RICT OF FLORIDA	
Case number				☐ Check if this is an
(if known)				amended filing
Official Forr	m 106Dec			-
		nadissials ad Dalas	tarla Calaadulaa	40/45
Declaration	1 About an I	naiviauai Debi	tor's Schedules	12/15
\$250,000, or imp	•		y fraud in connection with a 18 U.S.C. §§ 152, 1341, 1519	bankruptcy case can result in fines up to , and 3571.
Did you pay	or agree to pay :	someone who is NOT	an attorney to help you fill o	ut bankruptcy forms?
☑ No				
☐ Yes. 1	Name of person			Attach Bankruptcy Petition Preparer's Notice,
_				Declaration, and Signature (Official Form 119).
Under pena true and co		eclare that I have read	I the summary and schedules	s filed with this declaration and that they are
V			v	

X /s/ Scott M. Smith Signature of Debtor 2 Scott M. Smith, Debtor 1

Date <u>07/06/2017</u> Date MM / DD / YYYY MM / DD / YYYY

Casse88117791kk9599355KKRRM DDocc111 Filibelc0077066117 Fragge44106f710

G	ill in this inf	ormation to id	entify you	ır case:		Ī		
D	ebtor 1	Scott	M.	Smith]		
		First Name	Middle Na	ame Last Name	9			
	ebtor 2 Spouse, if filing)	First Name	Middle Na	ame Last Name	e			
U	Inited States Bar	nkruptcy Court for	the: MIDDL	E DISTRICT OF FLO	ORIDA			
	ase number	, ,						
	f known)						☐ Check if this amended fili	
<u>O</u> 1	fficial Form	107						
St	atement o	f Financial A	Affairs fo	or Individuals	Filing for B	ankrı	uptcy	04/16
you	rrect informatio ur name and ca	n. If more space se number (if kno	is needed, a own). Answe		et to this form. C	n the to	equally responsible for support of any additional pages,	
_	\A/In a4 in		-40					
1.	What is your ☐ Married ☐ Not marrie	current marital st ed	atus?					
2.	☑ No		·	where other than who			w.	
3.	_						··· ity property state or territo	rv?
	(Community p				•		ada, New Mexico, Puerto Rio	-
	✓ No ☐ Yes. Mak	e sure you fill out	Schedule H:	Your Codebtors (Offici	ial Form 106H).			
P	Part 2: Exp	olain the Sour	ces of You	ır Income				
4.	Fill in the total	amount of income	you receive	nt or from operating a d from all jobs and all l ome that you receive to	businesses, includ	ding part		endar years?
	□ No ☑ Yes. Fill i	n the details.						
				Debtor 1			Debtor 2	
				ources of income theck all that apply.	Gross incom (before deduction and exclusion	ctions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
	•	the current year for bankruptcy:	until <u></u>	Wages, commission bonuses, tips	ns, \$42,0	00.00	Wages, commissions, bonuses, tips	_
				Operating a busines	ss		Operating a business	
Foi	r the last calend	dar year:	5	Wages, commission bonuses, tips	ns, \$1,5	00.00	Wages, commissions, bonuses, tips	
(Ja	nuary 1 to Dece	mber 31, <u>2016</u>)	·	Operating a busines	SS		Operating a business	
Foi	r the calendar y	ear before that:	5	Wages, commission	ns, \$115,1	23.00	☐ Wages, commissions,	
(Ja	nuary 1 to Dece	mber 31, 2015)	·	bonuses, tips Operating a busines	SS		bonuses, tips Operating a business	

Casse88117791kk9599355KKRRM DDocc111 Filibelc0077066117 Fragge-442206f710

Deb	otor 1	Scott M. Smith		Case nu	mber (if known)		
5. Did you receive any other income during this year or the two pre Include income regardless of whether that income is taxable. Examp unemployment; and other public benefit payments; pensions; rental in and gambling and lottery winnings. If you are in a joint case and you Debtor 1.			ples of other income are income; interest; dividen	alimony; child support; Sods; money collected from	lawsuits; royalties;		
	List ea	ach source and the gross income fr	om each source separately	v. Do not include income	that you listed in line 4.		
	□ No	oes. Fill in the details.					
			Debtor 1		Debtor 2		
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions	
		ary 1 of the current year until ou filed for bankruptcy:					
		t calendar year: to December 31, 2016)					
		endar year before that: to December 31, 2015)	401(k) Withdrawl	\$132,683.00			
(Jui	idaiy i	YYYY YYYY					

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Debtor 1		Scott M.	. Smith	Case number (if known)					
Р	art 3:	List C	ertain Payments You M	ade Before `	You Filed for Ba	nkruptcy			
6.	Are eith	er Debtoi	r 1's or Debtor 2's debts prim	arily consume	r debts?				
	□ No.		r Debtor 1 nor Debtor 2 has ped by an individual primarily for	-			d in 11 U.S.C. § 101(8) as		
		During	the 90 days before you filed for	or bankruptcy, d	id you pay any credit	or a total of \$6,425*	or more?		
		☐ No.	Go to line 7.						
		Yes	total amount you paid that co	reditor. Do not	hom you paid a total of \$6,425* or more in one or more payments and the editor. Do not include payments for domestic support obligations, such as Also, do not include payments to an attorney for this bankruptcy case.				
		* Subje	ect to adjustment on 4/01/19 ar	nd every 3 years	after that for cases	filed on or after the	date of adjustment.		
	✓ Yes	Debtor	1 or Debtor 2 or both have p	rimarily consu	ımer debts.				
		During	the 90 days before you filed for	or bankruptcy, d	id you pay any credit	or a total of \$600 or	more?		
		▼ No.	Go to line 7.						
		☐ Yes	s. List below each creditor to w creditor. Do not include pay Also, do not include paymer	ments for dome	estic support obligation	ons, such as child su			
7.	Insiders corporate agent, ir such as	include yo ions of whacluding o child supp	nich you are an officer, director	ners; relatives o r, person in cont	of any general partner trol, or owner of 20%	rs; partnerships of w or more of their voti	e who was an insider? hich you are a general partner; ng securities; and any managing s for domestic support obligations		
	_			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment		
	ther der's name			_	\$500.00	\$3,500.00	_		
111310	aci 3 name			6/2017					
Nun	nber Stre	eet							
				_					
Citv			State ZIP Code	_					

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Deb	otor 1	Scott M. Smith		Case number (if known)	
8.		1 year before you filed fo	or bankruptcy, did you make any payn	nents or transfer any property on accou	nt of a debt that
	Include	e payments on debts guara	nteed or cosigned by an insider.		
	☑ No	s. List all payments that b	enefited an insider.		
Р	art 4:	Identify Legal Act	ions, Repossessions, and Fore	eclosures	
9.	List all		rsonal injury cases, small claims actions	r lawsuit, court action, or administrative s, divorces, collection suits, paternity action	
	□ No ☑ Ye	s. Fill in the details.			
-	e title		Nature of the case	Court or agency	Status of the case
	_	Community Services Scott M. Smith	Warrant in Debt - HOA Fees	James City County Court Court Name	Pending
					On appeal
Cas	se numb	er		Number Street	Concluded
			•		<u> </u>
				City State ZIP	Code
10.	seized	1 year before you filed for, or levied? all that apply and fill in the		rty repossessed, foreclosed, garnished,	attached,
	ب	o. Go to line 11. s. Fill in the information be	elow.		
11.			for bankruptcy, did any creditor, inclu refuse to make a payment because y	uding a bank or financial institution, set on owed a debt?	off any
	✓ No	s. Fill in the details.			
12.			or bankruptcy, was any of your proper eiver, a custodian, or another official	rty in the possession of an assignee for ? ?	the benefit of
	✓ No				

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Debtor 1	Scott M. Smi	th		Case number	r (if known)			
Part 5:	List Certai	in G	ifts and Coı	ntributions				
13. Withi	n 2 years before	you f	iled for bankr	uptcy, did you give any gifts with a total value of m	ore than \$600 per pers	on?		
☑ Y	lo 'es. Fill in the deta	ails fo	or each gift.					
	n 2 years before y charity?	you f	iled for bankr	uptcy, did you give any gifts or contributions with a	a total value of more th	an \$600		
	lo 'es. Fill in the deta	ails fo	or each gift or c	contribution.				
Part 6:	List Certai	in Lo	osses					
	n 1 year before y disaster, or gam			ptcy or since you filed for bankruptcy, did you lose	e anything because of t	heft, fire,		
☐ Y	lo 'es. Fill in the deta	ails.						
Part 7:	List Certai	in Pa	ayments or	Transfers				
anyo	5. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.							
	lo 'es. Fill in the deta	ails.						
The Gold	len Law Group Was Paid			Description and value of any property transferred Attorney Fees	d Date payment or transfer was made	Amount of payment		
808 Oakf				_	06/15/2017	\$600.00		
Number	Street							
Brandon City		L	33551 ZIP Code	-				
Email or wel	osite address			-				
Person Who	Made the Payment,	if Not	You	-				
Debtorcc Inc. Person Who Was Paid				Description and value of any property transferred Certificate of Counseling	d Date payment or transfer was made	Amount of payment		
	mit Avenue Street			-	5/11/2017	\$14.95		
Jersey C			07302	_				
City Email or wel	Si osite address	tate	ZIP Code	-				
Person Who	Made the Payment	if Not	Vou	_				

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Deb	otor 1	Scott M. Smith	Case number (if known)
17.		1 year before you filed for bankruptcy, did you or anyone else acting on who promised to help you deal with your creditors or to make paymen	
	Do not i	include any payment or transfer that you listed on line 16.	
	✓ No ☐ Yes	s. Fill in the details.	
18.		2 years before you filed for bankruptcy, did you sell, trade, or otherwis ty transferred in the ordinary course of your business or financial affair	
		both outright transfers and transfers made as security (such as granting of include gifts and transfers that you have already listed on this statement.	a security interest or mortgage on your property).
	✓ No ☐ Yes	s. Fill in the details.	
19.		10 years before you filed for bankruptcy, did you transfer any property a beneficiary? (These are often called asset-protection devices.)	to a self-settled trust or similar device of which
	✓ No ☐ Yes	s. Fill in the details.	
P	art 8:	List Certain Financial Accounts, Instruments, Safe Depo	osit Boxes, and Storage Units
20.		1 year before you filed for bankruptcy, were any financial accounts or i , closed, sold, moved, or transferred?	nstruments held in your name, or for your
		checking, savings, money market, or other financial accounts; certificates of pension funds, cooperatives, associations, and other financial institutions.	of deposit; shares in banks, credit unions, brokerage
	✓ No ☐ Yes	s. Fill in the details.	
21.	-	now have, or did you have within 1 year before you filed for bankruptourities, cash, or other valuables?	y, any safe deposit box or other depository
	✓ No ☐ Yes	s. Fill in the details.	
22.	•	ou stored property in a storage unit or place other than your home with	nin 1 year before you filed for bankruptcy?
	✓ No ☐ Yes	s. Fill in the details.	
P	art 9:	Identify Property You Hold or Control for Someone Else	•
23.	•	hold or control any property that someone else owns? Include any print rust for someone.	operty you borrowed from, are storing for,
	✓ No ☐ Yes	s. Fill in the details.	

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Deb	otor 1	Scott M. Smith Case number (if known)
P	art 10	Give Details About Environmental Information
or	the pu	rpose of Part 10, the following definitions apply:
ı	hazard	nmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of bus or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, ng statutes or regulations controlling the cleanup of these substances, wastes, or material.
		eans any location, facility, or property as defined under any environmental law, whether you now own, operate, or t or used to own, operate, or utilize it, including disposal sites.
		ous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic nce, hazardous material, pollutant, contaminant, or similar item.
Rep	ort all	notices, releases, and proceedings that you know about, regardless of when they occurred.
24.	Has a law?	ny governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental
	✓ N	es. Fill in the details.
25.	☑ N	you notified any governmental unit of any release of hazardous material? es. Fill in the details.
26.	Have order	you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and s.
	✓ N	es. Fill in the details.
P	art 11	Give Details About Your Business or Connections to Any Business
27.	Within busin	a 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any ess?
]]]]	A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation
	_	o. None of the above applies. Go to Part 12. es. Check all that apply above and fill in the details below for each business.
28.		n 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include ancial institutions, creditors, or other parties.
		os. Fill in the details helow

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Debtor 1	Scott M. Smith		Case number (if known)
Part 12	: Sign Below		
that answe	ers are true and correct. I und	erstand that making a false statemer ankruptcy case can result in fines up	nments, and I declare under penalty of perjury nt, concealing property, or obtaining money or to \$250,000, or imprisonment for up to 20 years,
X /s/ Sco	ott M. Smith	X	
Scott M	. Smith, Debtor 1	Signature of Debtor 2	
Date _	07/06/2017	Date	<u> </u>
Did you at	tach additional pages to Your	Statement of Financial Affairs for Inc	lividuals Filing for Bankruptcy (Official Form 107)?
☑ No			
Yes			
Did you pa	ay or agree to pay someone w	ho is not an attorney to help you fill o	out bankruptcy forms?
☑ No			
Yes. N	lame of person		Attach the Bankruptcy Petition Preparer's Notice,

Casse8811776lkk9599355KKRRM DDocc111 Filibeld0077066117 Fragge449906f710

Fill in this inf	ormation to	identify your case:	:	
Debtor 1	Scott	М.	Smith	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court fo	or the: MIDDLE DIST	RICT OF FLORIDA	
Case number				
(if known)				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Hold Secured Claims

	For any creditor	ors that you listed in Part 1 of <i>Schedule D: Cr</i> mation below.	redito	ors Who Hold Claims Secured by Prop	erty (Official Form 106D),
Identify the creditor and the property that is collateral			at do you intend to do with the perty that secures a debt?	Did you claim the property as exempt on Schedule C?		
	Creditor's name:	Carmax Auto Finance		Surrender the property. Retain the property and redeem it.		No Yes
	Description of property securing debt:	2013 Honda Accord (approx. 51000 miles) VIN: 1HGCR		Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:		
	Creditor's name:	Ditech	☑	Surrender the property. Retain the property and redeem it.		No Yes
	Description of property securing debt:	Debtor's Non-Homestead Property		Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:		
	Creditor's name:	Kingsmill Community Services Assoc		Surrender the property. Retain the property and redeem it.	V	No Yes
	Description of	Debtor's Non-Homestead Property		Retain the property and enter into a		

property

securing debt:

Reaffirmation Agreement.

Retain the property and [explain]:

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Deptor 1	Scott M. Smith		Case number (if known)	
Part 2:	List Your Unexpired	Personal Property Leases		
ill in the in	formation below. Do not list	real estate leases. Unexpired le	: Executory Contracts and Unexpired Leases (Official For ases are leases that are still in effect; the lease period has trustee does not assume it. 11 U.S.C. § 365(p)(2).	,.
Descri	ibe your unexpired personal լ	property leases	Will this lease be assu	med?
None				
Part 3:	Sign Below			
			about any property of my estate that secures a debt and	
X /s/ Sco	der penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and resonal property that is subject to an unexpired lease. Scott M. Smith out M. Smith, Debtor 1 Signature of Debtor 2			
Scott M.	Smith, Debtor 1	Signature of Deb	otor 2	
Date 0	7/06/2017	Date		
M	IM / DD / YYYY	MM / DD /	YYYY	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts.
 Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 -- Liquidation
- Chapter 11 -- Reorganization
- Chapter 12 -- Voluntary repayment plan for family farmers or fishermen
- Chapter 13 -- Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

+	\$75	filing fee administrative fee trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that the even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form--the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form-sometimes called the *Means Test*--deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income

for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

+		filing fee administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

\$200 filing fee \$75 administrative fee \$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

\$235 filing fee \$75 administrative fee \$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers.
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and local rules of the court.

For more information about the documents and their deadlines, go to:

 $\frac{\text{http://www.uscourts.gov/bkforms/bankruptcy_forms}}{\text{.html\#procedure.}}$

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury--either orally or in writing--in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case togethercalled a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA TAMPA DIVISION

In	In re Scott M. Smith	Case No.	
		Chapter	7
	DISCLOSURE OF COMPENSATION OF ATTO	RNEY FOR	RDEBTOR
1.	 Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am that compensation paid to me within one year before the filing of the petition in services rendered or to be rendered on behalf of the debtor(s) in contemplatio is as follows: 	bankruptcy, or	agreed to be paid to me, for
	For legal services, I have agreed to accept		\$600.00
	Prior to the filing of this statement I have received		\$600.00
	Balance Due		\$0.00
2.	2. The source of the compensation paid to me was:		
	✓ Debtor □ Other (specify)		
3.	3. The source of compensation to be paid to me is:		
	✓ Debtor ☐ Other (specify)		
4.	4. I have not agreed to share the above-disclosed compensation with any of associates of my law firm.	ther person unle	ess they are members and
	☐ I have agreed to share the above-disclosed compensation with another prassociates of my law firm. A copy of the agreement, together with a list of compensation, is attached.		
5.	5. In return for the above-disclosed fee, I have agreed to render legal service for	all aspects of th	ne bankruptcy case, including:
	 a. Analysis of the debtor's financial situation, and rendering advice to the debt bankruptcy; 	tor in determinin	ng whether to file a petition in
	b. Preparation and filing of any petition, schedules, statements of affairs and p	olan which may	be required;

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B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Any post-petition services. If the debtor wishes the attorney to represent him in any post-petition matters, a separate retainer agreement will be executed.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

07/06/2017 /s/ G. Donald Golden, Esquire

Date

G. Donald Golden, Esquire The Golden Law Group 808 Oakfield Dr Brandon, FL 33511

Phone: (813) 413-8700 / Fax: (813) 413-8701

Bar No. 0137080

/s/ Scott M. Smith

Scott M. Smith

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UNITED STATES BANKRUPTCY COURT MIDDLE DISTRICT OF FLORIDA TAMPA DIVISION

IN RE: Scott M. Smith CASE NO

CHAPTER 7

VERIFICATION OF CREDITOR MATRIX

knowle	•	attached	list of creditors is true and correct to the best of his/her
Date _	7/6/2017	Signature	/s/ Scott M. Smith Scott M. Smith

Casse811779kk959335kkRNM DDocc111 Filibelc00770661177 Fragge558306f710 Debtor(s): Scott M. Smith

Chapter: 7

Aflac Federal Credit Union 1104 Lockwood Ave Columbus, GA 31906

Chase Bank, USA, N.A. PO Box 15153 Wilmington, DE 19886

P.O.Box 6497

Sioux Falls, SD 57117

THD/CBSD

Bank of America PO Box 15312 Wilmington, DE 19850

Cox Communications P.O. Box 79175 Phoenix, AZ 85062

Wells Fargo Bank P.O. Box 14542 Des Moines, IA 50306

BayPort Credit Union 3711 Huntington Avenue Newport News, VA 23607

Credit One Bank P.O.Box 60500 City of Industry, CA 91716

BEE Law Group, LLC 6003 Executive Blvd, Suite 101 1360 E. Parham Road, Suite 200 Rockville, MD 20852

Dankos, Gordon & Tucker, P. C.

Richmond, VA 23227

Best Buy c/o Capital One Retail Services 502 E Market St P.O. Box 5893 Carol Stream, IL 60197

Discover Bank Greenwood, DE 19950

Capital Management Services, LP Ditech 698 1/2 South Ogden Street Buffalo, NY 14206

P.O. Box 6172 Rapid City, SD 57709

Capital One PO Box 30285 Salt Lake City UT 84130-0285

Kingsmill Community Services As 309 McLaws Circle Williamsburg, VA 23185

Carmax Auto Finance P.O.Box 440609 Kennesaw, GA 30160 Kingsmill Country Club 1010 Kingsmill Rd, Williamsburg, VA 23185

Casey Auto Group 813 Diligence Dr. #117 Newport News, VA 23606

Northstar Location Services, In-4285 Genesee Street Buffalo, NY 14225

Central Credit Services Inc. P.O.Box 15118 Jacksonville, FL 32239

PROSPER 221 Main Street Suite 300 San Francisco, CA 94105

Casse88117791kk9599355kKRRM DDocc111 Filibelc007/066117 Flagge559906f710

E	ill in th	is information to	dentify your case:		Check one	e box only as dire	cted in this
	ebtor 1			Smith		in Form 122A-1Su	
"	eptor i	Scott First Name	M. Middle Name	Last Name	1. There is	no presumption of abus	6e.
	ebtor 2 Spouse, it	filing) First Name	Middle Name	Last Name	of abuse	ulation to determine if a applies will be made u est Calculation (Official	nder Chapter 7
U	nited Sta	tes Bankruptcy Court fo	or the: MIDDLE DISTE	RICT OF FLORIDA		ns Test does not apply	
	ase num f known)	ber			of qualific	ed military service but i	t could apply
					Check if t	his is an amended filing	J
Of	ficial F	Form 122A-1					
Cł	napter	7 Statement o	f Your Current	Monthly Income			12/15
info are mil 122	ormation exempte itary ser	applies. On the top of the top of the definition	f any additional pages n of abuse because yo	neet to this form. Include the write your name and case u do not have primarily corion from Presumption of Al	e number (if knowr Isumer debts or be	n). If you believe that yecause of qualifying	you
_							
1.	What is	s your marital and filir	g status? Check one o	nly.			
	☑ No	ot married. Fill out Col	umn A, lines 2-11.				
	□ M	arried and your spous	e is filing with you. Fi	II out both Columns A and B,	lines 2-11.		
	☐ M	arried and your spous	e is NOT filing with yo	u. You and your spouse ar	re:		
		Living in the same	household and are not	t legally separated. Fill out b	ooth Columns A and	d B, lines 2-11.	
		declare under penal	y of perjury that you and	I. Fill out Column A, lines 2-1 d your spouse are legally sep that do not include evading	arated under nonba	ankruptcy law that appli	es or that you
	bankru August in the re	ptcy case. 11 U.S.C. 31. If the amount of your esult. Do not include a	§ 101(10A). For exampour monthly income various income amount more	ed from all sources, derived ole, if you are filing on Septen ed during the 6 months, add than once. For example, if I nave nothing to report for any	nber 15, the 6-mont the income for all 6 both spouses own t	th period would be Marc months and divide the he same rental property	ch 1 through total by 6. Fill
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	_	ross wages, salary, ti all payroll deductions).	os, bonuses, overtime,	and commissions	\$7,216.03		
3.		ny and maintenance pa nn B is filled in.	ayments. Do not includ	le payments from a spouse	\$0.00		
4.	expens regular your de	ses of you or your dep contributions from an upendents, parents, and se only if Column B is r	roommates. Include re		\$0.00		

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Deb	tor 1	Scott M. Smith			c	ase number (if k	nown)	
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	•
5.	Net inc	ome from operating a busine	ess, profession, o	r farm				
			Debtor 1	Debtor 2				
	Gross re	eceipts (before all ons)	\$0.00		-			
	Ordinar expense	y and necessary operating -es	\$0.00		. Сору			
		nthly income from a business, ion, or farm	\$0.00		here →	\$0.00		
6.	Net inc	ome from rental and other re	eal property					
			Debtor 1	Debtor 2				
	Gross re	eceipts (before all ons)	\$0.00					
	Ordinar expense	y and necessary operating -es	\$0.00		Сору			
		nthly income from rental or eal property	\$0.00		here →	\$0.00		
7.	Interes	t, dividends, and royalties				\$0.00		
8.	Unemp	loyment compensation				\$0.00		
		enter the amount if you contenunder the Social Security Act.						
	For	you		\$0.	00			
	For	your spouse						
9.		n or retirement income. Do not benefit under the Social Securi	•	ount received that	t	\$0.00		
10.	amount or paym or interr	e from all other sources not I Do not include any benefits nents received as a victim of a national or domestic terrorism. e page and put the total below	received under the war crime, a crime If necessary, list of	Social Security A against humanity	.ct /,			
	Total ar	mounts from separate pages, i	f any.		+		+	
11.	Add line	ate your total current monthly es 2 through 10 for each colum dd the total for Column A to the	nn.	3.		\$7,216.03	+	= \$7,216.03 Total current monthly income

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Deb	otor 1	S	cott M. Smith		Case number (if known)
Р	art 2:		Determine Whether the Means	Test Applies to You	
12.	Calcu	ulate	your current monthly income for the y	vear. Follow these steps:	
	12a.	Cop	by your total current monthly income from	line 11	Copy line 11 here 😝 12a. \$7,216.03
		Mul	tiply by 12 (the number of months in a ye	ear).	X 12
	12b.	The	e result is your annual income for this par	t of the form.	12b. \$86,592.36
13.	Calcu	ulate	the median family income that applies	s to you. Follow these steps:	
	Fill in	the s	state in which you live.	Florida	
	Fill in	the r	number of people in your household.	1	
	Fill in	the r	median family income for your state and	size of household	13. \$44,576.00
			ist of applicable median income amounts s for this form. This list may also be ava		•
14.	How	do th	ne lines compare?		
	14a.		Line 12b is less than or equal to line 13 Go to Part 3.	s. On the top of page 1, check b	oox 1, There is no presumption of abuse.
	14b.	☑	Line 12b is more than line 13. On the t Go to Part 3 and fill out Form 122A-2.	op of page 1, check box 2, The	presumption of abuse is determined by Form 122A-2.
P	art 3:		Sign Below		
12. ()				v that the information on this sta	tement and in any attachments is true and correct.
	Бу с	Jigi III	ig fiere, racolate ander perially of perjur	y that the information on this ste	itement and in any attachments is the and correct.
			cott M. Smith	X	
	,	Scott	M. Smith, Debtor 1	Signa	ature of Debtor 2
	[Date	7/6/2017	Date	
		•	MM / DD / YYYY	•	MM / DD / YYYY
	If vo	nu ch	ecked line 14a, do NOT fill out or file For	m 122A-2	

If you checked line 14b, fill out Form 122A-2 and file it with this form.

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Fill in this in	nformation to i	identify your case	:	Check the appropriate box as directed
Debtor 1	Scott	M.	Smith	in lines 40 or 42:
	First Name	Middle Name	Last Name	According to the calculation required by this Statement:
Debtor 2 (Spouse, if filin	g) First Name	Middle Name	Last Name	1. There is no presumption of abuse.
United States E	Bankruptcy Court fo	or the: MIDDLE DIST	RICT OF FLORIDA	
Case number (if known)				☐ Check if this is an amended filing
Official For	m 122A-2			
Chapter 7	Means Test	Calculation		04/
ccurate. If mo	re space is neede	d, attach a separate s		ther, both are equally responsible for being le the line number to which the additional case number (if known).
Part 1: D	etermine Your	Adjusted Income)	
. Copy your	total current mon	thly income	Copy line 11 from C	Official Form 122A-1 here
. Did you fill	out Column B in I	Part 1 of Form 122A-1	?	
☑ No. Fi	II in \$0 for the total	on line 3.		
Yes. Is	s your spouse filing	g with you?		
□ N	o. Go to line 3.			
☐ Y	es. Fill in \$0 for the	e total on line 3.		
			ng any part of your spous	se's income not used to pay for
-		122A-1, was any amou you or your dependent		orted for your spouse NOT regularly used
☐ No. Fi	II in \$0 for the total	on line 3.		
Yes. F	ill in the informatio	n below:		
State 6	each purpose for	which the income was	s used Fill in the	amount you
	to support people	is used to pay your spo other than you or your	are subtra	acting from use's income
			+	
Total				\$0.00 Copy.total.here → - \$0.0

Official Form 122A-2

Adjust your current monthly income. Subtract the total on line 3 from line 1.

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Debtor 1	Scott M. Smith		Case nur	mber (if known)		
Part 2	Calculate Your Deductions from Yo	ur Income				
these an	rnal Revenue Service (IRS) issues National and Lonounts to answer the questions in lines 6-15. To be in the separate instructions for this form. This iffice.	find the IRS stand	lards, go online u	sing the link	у	
use some from you	ne expense amounts set out in lines 6-15 regardless e of your actual expenses if they are higher than the r spouse's income in line 3 and do not deduct any op Form 122A-1.	standards. Do no	t deduct any amou	nts that you subt	racted	
f your ex	penses differ from month to month, enter the averag	ge expense.				
Wheneve	er this part of the form refers to you, it means both yo	ou and your spouse	e if Column B of Fo	orm 122A-1 is fille	ed in.	
5. Th	ne number of people used in determining your dec	ductions from inc	ome			
ret	I in the number of people who could be claimed as e turn, plus the number of any additional dependents we different from the number of people in your househo	vhom you support.		I	1	
Nationa	al Standards You must use the IRS National S	Standards to answe	er the questions in	lines 6-7.		
	ood, clothing and other items: Using the number of in the dollar amount for food, clothing, and other iter		ed in line 5 and the	IRS National St	andards,	\$639.00
Sta pe he	at-of-pocket health care allowance: Using the nur andards, fill in the dollar amount for out-of-pocket he ople who are under 65 and people who are 65 or old alth care costs. If your actual expenses are higher to 22.	alth care. The nui lerbecause older	mber of people is s people have a higl	plit into two cate her IRS allowand	gories e for	
F	People who are under 65 years of age					
7a	. Out-of-pocket health care allowance per person	\$49.00				
7b	. Number of people who are under 65	x1				
7c	. Subtotal. Multiply line 7a by line 7b.	\$49.00	Copy here →	\$49.00		
F	People who are 65 years of age or older					
7d	. Out-of-pocket health care allowance per person	\$117.00	_			
7e	. Number of people who are 65 or older	х				
7f.	Subtotal. Multiply line 7d by line 7e.	\$0.00	Copy here ++	\$0.00		
	-			£40.00	Copy total	¢40.00
7 g	. Total. Add lines 7c and 7f			\$49.00	7g.	\$49.00

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Debto	r 1	Scott M. Si	mith	Case number (if known)					
Loc	al St	andards	You must use the IRS Local Stan	ndards to answer the questions in lines 8-15.					
			from the IRS, the U.S. Trustee Proes into two parts:	ogram has divided the IRS Local Standard for housing					
		_	s Insurance and operating expe s Mortgage or rent expenses	enses					
To a	nsw	er the question	ns in lines 8-9, use the U.S. Truste	ee Program chart.					
		-	ne using the link specified in the settcy clerk's office.	parate instructions for this form. This chart may also be					
8.		-	ies Insurance and operating expount listed for your county for insuran		\$454.00				
9.	Hou	ısing and utiliti	ies Mortgage or rent expenses:						
	9a.	•	aber of people you entered in line 5, y for mortgage or rent expenses.	fill in the dollar amount listed \$774.00					
	9b.	Total average your home.	monthly payment for all mortgages	and other debts secured by					
		contractually of	ne total average monthly payment, a flue to each secured creditor in the 6 hen divide by 60.						
		Name of the	creditor	Average monthly payment					
		•		+ Repeat this					
			Total average monthly payment	\$0.00 Copy here → - \$0.00 amount on line 33a.					
	9c.	Net mortgage	or rent expense.						
			bb (total average monthly payment) f . If this amount is less than \$0, ente	, o o wilding	\$774.00				
10.				n of the IRS Local Standard for housing is incorrect es, fill in any additional amount you claim.					
	Ехр	lain							
	why								
11.	LOC	al transportation on Go to line 1	•	of vehicles for which you claim an ownership or operating expense.					
		1. Go to line 1							
		2 or more. Go							
12.		•	•	ndards and the number of vehicles for which you claim the oly for your Census region or metropolitan statistical area.	\$215.00				

Casse8811779lkk9599355KKRRM DDocc111 Filibelc0077066117 Flagge655coff710

(expense for e	ership or lease expense: Using the IRS ach vehicle below. You may not claim the addition, you may not claim the expens	ne expense if you do r	not make ai	•		
•	Vehicle 1	Describe Vehicle 1: 2013 Honda A	Accord (approx. 51	000 miles	s) VIN: 1HGCR		
	13a. Ownersh	ip or leasing costs using IRS Local Stand	dard		\$485.00		
	13b. Average	monthly payment for all debts secured b	y Vehicle 1.				
	Do not ir	nclude costs for leased vehicles.					
	amounts	late the average monthly payment here a that are contractually due to each secure filed for bankruptcy. Then divide by 60.					
	Name	of each creditor for Vehicle 1	Average monthly payment				
	Carma	« Auto Finance	<u>\$306.22</u>				
		Total average monthly payment	***	Copy here	- \$306.22	Repeat this amount on line 33b.	
		cle 1 ownership or lease expense. line 13b from line 13a. If this amount is	less than \$0, enter \$0)	\$178.78	Copy net Vehicle 1 expense here	\$178.78
,	Vehicle 2	Describe Vehicle 2:					
	13d. Ownersh	ip or leasing costs using IRS Local Stand	dard				
	•	monthly payment for all debts secured b leased vehicles.	y Vehicle 2. Do not ir	nclude			
	Name	of each creditor for Vehicle 2	Average monthly payment				
			+			5	
		Total average monthly payment		Copy here →		Repeat this amount on line 33c.	
						Copy net Vehicle 2	
•		cle 2 ownership or lease expense. line 13e from 13d. If this amount is less	than \$0, enter \$0.			expense here	\$0.00
		portation expense: If you claimed 0 veh			· ·	he Public	\$0.00
á	also deduct a	ublic transportation expense: If you cla public transportation expense, you may e than the IRS Local Standard for Public	fill in what you believe				\$0.00

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Debto	otor 1 Scott M. Smith Case number (if known	vn)
Othe	ther Necessary Expenses In addition to the expense deductions listed above, you are allowed your following IRS categories.	monthly expenses for the
16.	5. Taxes: The total monthly amount that you will actually owe for federal, state and local taxes, such as ir self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amour your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.	nt withheld from
17.	7. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retireme union dues, and uniform costs.	nt contributions, \$0.00
	Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or pay	roll savings.
18.	6. Life insurance: The total monthly premiums that you pay for your own term life insurance. If two marr filing together, include payments that you make for your spouse's term life insurance. Do not include prinsurance on your dependents, or a non-filing spouse's life insurance, or for any form of life insurance of term.	remiums for life
19.	Court-ordered payments: The total monthly amount that you pay as required by the order of a court of agency, such as spousal or child support payments.	or administrative \$4,000.00
	Do not include payments on past due obligations for spousal or child support. You will list these obligations	tions in line 35.
20.	 Education: The total monthly amount that you pay for education that is either required: as a condition for your job, or for your physically or mentally challenged dependent child if no public education is available for sim 	\$0.00
21.	Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, Do not include payments for any elementary or secondary school education.	
22.	2. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for is required for the health and welfare of you or your dependents and that is not reimbursed by insurance health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.	
23.	6. Optional telephones and telephone services: The total monthly amount that you pay for telecommun for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or phone service, to the extent necessary for your health and welfare or that of your dependents or for the of income, if it is not reimbursed by your employer.	r business cell
	Do not include payments for basic home telephone, internet and cell phone service. Do not include sel expenses, such as those reported on line 5 of Official Form 122A-1, or any amount you previously deduced to the control of the co	
24.	 Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23. 	\$8,160.78

Casse88117791kk9599355kKRRM DDocc111 Filibelc007/066117 Flagge667706f710

Debto	or 1 Scott M. Smith	Case number (if known)								
Add	litional Expense Deductions	These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24.								
25.	· · · · · · · · · · · · · · · · · · ·	surance, and health savings account expenses. The monthly expenses for health and health savings accounts that are reasonably necessary for yourself, your								
	Health insurance	\$146.86								
	Disability insurance	\$63.68								
	Health savings account	+\$0.00								
	Total	\$210.54 Copy total here	\$210.54							
	Do you actually spend this total a	amount?								
	☐ No. How much do you actua	ually spend?								
	✓ Yes									
26.	will continue to pay for the reason member of your household or me	e care of household or family members. The actual monthly expenses that you chable and necessary care and support of an elderly, chronically ill, or disabled ember of your immediate family who is unable to pay for such expenses. These ions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b).	\$0.00							
27.	Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply.									
	By law, the court must keep the nature of these expenses confidential.									
28.	Additional home energy costs. on line 8.	. Your home energy costs are included in your insurance and operating expenses								
	•	ou believe that you have home energy costs that are more than the home energy costs included in expenses on 8, then fill in the excess amount of home energy costs.								
		ou must give your case trustee documentation of your actual expenses, and you must show that the additional nount claimed is reasonable and necessary.								
29.		ndent children who are younger than 18. The monthly expenses (not more than for your dependent children who are younger than 18 years old to attend a private or school.	\$0.00							
	9 ,	e documentation of your actual expenses, and you must explain why the amount ssary and not already accounted for in lines 6-23.								
	* Subject to adjustment on 4/01/1	19, and every 3 years after that for cases begun on or after the date of adjustment.								
30.	higher than the combined food ar	expense. The monthly amount by which your actual food and clothing expenses are and clothing allowances in the IRS National Standards. That amount cannot be more g allowances in the IRS National Standards.								
	To find a chart showing the maximistructions for this form. This ch									
	You must show that the additional	ou must show that the additional amount claimed is reasonable and necessary.								
31.	_	utions. The amount that you will continue to contribute in the form of cash or financial ritable organization. 26 U.S.C. § 170(c)(1)-(2).	+\$500.00							
32.	Add all of the additional expense Add lines 25 though 31.	se deductions.	\$710.54							

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Debtor 1		Scott M. Smith					(Case number (if known)				
Deductions for Debt Payment												
33.	 For debts that are secured by an interest in property that you or loans, and other secured debt, fill in lines 33a through 33e. 				own, including home mortgages, vehicle							
					ayment, add all ar		are cont	ractu	ually du	e to each secure	d creditor in	
										verage monthly syment		
		Mort	gages on you	r home:								
	33a.	Copy	line 9b here						→	\$0.00		
		Loar	ns on your firs	t two vehicle	s:							
	33b.	Copy	line 13b here.						→	\$306.22		
	33c.	Copy	line 13e here.						→	\$0.00		
	33d.	List	other secured d	lebts:								
			nch creditor fo red debt	r	Identify propert secures the del		Does includinsura	le ta	xes or			
							-	7 1	No			
					-		<u> </u>		Yes			
							[י כ	No			
								□ `	Yes			
					<u></u>				No +	'		
								□ `	Yes		Copy total	
	33e.	Tota	average mont	hly payment.	Add lines 33a thro	ugh 33d				\$306.22	here -	\$306.22
34.					3 secured by you		esidence	e, a v	vehicle	, or other prope	rty	
	neces	ssary	for your supp	ort or the sup	port of your depo	endents?						
	ш.		Go to line 35.									
	Ø '		payments liste	d in line 33, to	nust pay to a credit keep possession	of your pro	perty (ca	lled				
			the cure amou	nt). Next, divi	de by 60 and fill in	the inform	ation belo	OW.				
Nan	ne of tl	he cre	editor	Identify pro	•	Total c amoun				Monthly cure amount		
								÷ 6	0 =			
								÷ 6	0 =			
								÷6	0 = 4			
				-					-		Copy total	
								To	otal	\$0.00	here →	\$0.00
35.	alimo		that are past d		as a priority tax, of filing date of your							
			Go to line 36.									
					of these priority cla aims, such as thos							
			Total amount of	of all past-due	priority claims						÷ 60 =	\$0.00

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Debto	or 1 <u>Sc</u>	ott M. Smith Case number (if known)
36.	For more i	ligible to file a case under Chapter 13? 11 U.S.C. § 109(e). Information, go online using the link for Bankruptcy Basics specified in the separate is for this form. Bankruptcy Basics may also be available at the bankruptcy clerk's office.
	✓ No. ☐ Yes.	Go to line 37. Fill in the following information.
		Projected monthly plan payment if you were filing under Chapter 13
		Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).
		To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.
		Average monthly administrative expense if you were filing under Chapter 13 Copy total here
37.		the deductions for debt payment. 33e through 36. \$306.22
Tota	al Deductio	ons from Income
38.	Add all of	the allowed deductions.
		24, All of the expenses allowed under IRS stillowances
	Copy line	32, All of the additional expense deductions \$710.54
	Copy line	37, All of the deductions for debt payment+ \$306.22
	Total dedu	
Pai	rt 3: D	etermine Whether There Is a Presumption of Abuse
39.	Calculate	monthly disposable income for 60 months
	39a. Cop	by line 4, adjusted current monthly income \$7,216.03
	39b. Cop	py line 38, <i>Total deductions</i> 9,177.54
		nthly disposable income. 11 U.S.C. § 707(b)(2). (\$1,961.51) here (\$1,961.51)
	For	the next 60 months (5 years)x 60
	39d. Tot	al. Multiply line 39c by 60
40.	Find out v	whether there is a presumption of abuse. Check the box that applies:
	<u> </u>	ine 39d is less than \$7,700*. On the top of page 1 of this form, check box 1, There is no presumption of abuse. Part 5.
		ine 39d is more than \$12,850*. On the top of page 1 of this form, check box 2, There is a presumption of abuse. may fill out Part 4 if you claim special circumstances. Then go to Part 5.
	☐ The I	ine 39d is at least \$7,700*, but not more than \$12,850*. Go to line 41.
	* Sub	eject to adjustment on 4/01/19, and every 3 years after that for cases filed on or after the date of adjustment.

$\textbf{Caase} 881.179 \text{lkk} 959335 \text{kKRMM} \quad \textbf{DDooc} 111 \quad \textbf{Hillied} \text{d} \textbf{D07/0661.17} \quad \textbf{PRagge} = 70006 \text{f71.0}$

ebtor 1 S	Scott M. Smith Ca	ase number (if known)							
A	Fill in the amount of your total nonpriority unsecured debt. If you filled out A Summary of Your Assets and Liabilities and Certain Statistical Information SOfficial Form 106Sum), you may refer to line 3b on that form.	Schedules							
		x .25							
	25% of your total nonpriority unsecured debt. 11 U.S.C. \S 707(b)(2)(A)(i)(Multiply line 41a by 0.25.	Copy here →							
is enou	ine whether the income you have left over after subtracting all allowed digh to pay 25% of your unsecured, nonpriority debt. he box that applies:	leductions							
	ne 39d is less than line 41b. On the top of page 1 of this form, check box 1, b to Part 5.	There is no presumption of abuse.							
	ne 39d is equal to or more than line 41b. On the top of page 1 of this form, u may fill out Part 4 if you claim special circumstances. Then go to Part 5.	check box 2, There is a presumption of abuse.							
Part 4:	Give Details About Special Circumstances								
-	have any special circumstances that justify additional expenses or adjusters is no reasonable alternative? 11 U.S.C. § 707(b)(2)(B).	stments of current monthly income for							
☑ No	o. Go to Part 5.								
Yes. Fill in the following information. All figures should reflect your average monthly expense or income adjustment for each item. You may include expenses you listed in line 25.									
	You must give a detailed explanation of the special circumstances that make the expenses or income adjustments necessary and reasonable. You must also give your case trustee documentation of your a expenses or income adjustments.								
	Give a detailed explanation of the special circumstances	Average monthly expense or income adjustment							
									
Dowl E.	Cian Balaw								
Part 5:	Sign Below								
By signi	ing here, I declare under penalty of perjury that the information on this statem	ent and in any attachments is true and correct.							
	Scott M. Smith X	(D) ()							
Scot	tt M. Smith, Debtor 1 Signature	e of Debtor 2							
Date	e 7/6/2017 Date	M / DD / VVVV							
Scot	tt M. Smith, Debtor 1 Signature e_7/6/2017 Date	e of Debtor 2							